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PTO/SB/22 (10-08)

Approved for use through 11/30/2008. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number. Docket Number (Optional) PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 0465-1990P (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) Filed June 12, 2000 09/592,148-Conf. #5121 Application Number COPY PREVENTION METHOD AND APPARATUS OF A DIGITAL MAGNETIC RECORDING/REPRODUCING SYSTEM Art Unit 3685 Examiner C. O. Sherr This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Small Entity Fee One month (37 CFR 1.17(a)(1)) \$130 \$65 130.00 Two months (37 CFR 1.17(a)(2)) \$490 \$245 Three months (37 CFR 1.17(a)(3)) \$1110 \$555 \$865 Four months (37 CFR 1.17(a)(4)) \$1730 Five months (37 CFR 1.17(a)(5)) \$2350 \$1175 Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 November 20, 2008 Signature Date Esther H. Chong (703) 205-8000 Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of forms are submitted.

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PTO/SB/17 (10-08)
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Under the Pa	respond to a collection of information unless it displays a valid OMB control number							
Effective on 12/08/2004.				Complete ii Allowiii				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number		09/592,148-Conf. #5121		
FEE TRANSMITTAL				Filing Date		June 12, 2000		
For FY 2009				First Named Inventor Tae Joon P.			RK	
FOIT1 2009				Examiner Name C. O. Sherr				
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 3685				
TOTAL AMOUNT OF PAYMENT (\$) 130.00			Attorney Docket No. 0465-1990P					
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
x Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
	FI	LING FEES	SE	ARCH FEES		NATION FEES		
Application Ty	pe Fee (\$	Small Entity 5) Fee (\$)	Fee (\$	Small Entity) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees	Paid (\$)
Utility	330		540	270	220	110		
Design	220		100	50	140	70		
Plant	220		330	165	170	85		
Reissue	330		540	270	650	325		
Provisional	220	110	0	0	050	0		
2. EXCESS CLAIM FEES		110	U	v	v	Ů		Small Entity
Fee (\$) Fee (\$)								
Each claim over 20 (including Reissues)							52	26
Each independent claim over 3 (including Reissues)							220	110
Multiple dependent claims							390	195
Total Claims	ee Paid (\$)	Ņ	fultiple Depend	ent Claims	<u> </u>			
Total Claims Extra Claims Fee (\$) Fee Pai					<u>Fe</u>	e (\$)	Fee Paid (<u>\$)</u>
HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims Extra Claims Fee (\$)			F	ee Paid (\$)				
14 -14 or HP x = HP = highest number of independent claims paid for, if greater than 3.								
nr - highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
100 = /50 = (round up to a whole number) x =								
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 1251 Extension for response within first month 130.00								
SUBMITTED BY								
Signature	Little	<u> Clau</u>	4	Registration No. (Attorney/Agent)	40,953	Telephone	(703) 20	5-8000
Name (Print/Type)	Esther H. Chong		-			Date N	November	20, 2008